PART B - FEE(S) TRANSMITTAL

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INSTRUCTIONS: This fo appropriate. All further co- indicated unless corrected maintenance fee notification	rrespondence including the I below or directed otherwise	smitting the ISSU Patent, advance ord in Block 1, by (a)	E FEE and ders and noti	PUBLICATION FEE (if req fication of maintenance fees a new correspondence addres	will be mailed to the current s; and/or (b) indicating a sep	correspondence address as arate "FEE ADDRESS" for
	CE ADDRESS (Note: Use Block 1 for 590 09/20/2004	0	IPE	Fee(s) Transmittal, T	of mailing can only be used f his certificate cannot be used nal paper, such as an assignm tte of mailing or transmission.	for any other accompanying
WAGNER MUR TWO NORTH MA THIRD FLOOR SAN JOSE, CA 95			2 7 2004	I hereby certify that States Postal Service addressed to the M	ertificate of Mailing or Tran this Fee(s) Transmittal is bein with sufficient postage for fir all Stop ISSUE FEE address PTO (703) 746-4000, on the	ig deposited with the United rst class mail in an envelope above, or being facsimile
12/28/2004 HVUONG2 000			IDEM	Judy Day	venport	(Depositor's name)
01 FC:1504	300.00 DP			Gudyle	aver	(Signature)
02 FC:1501 03 FC:8001	1400.00 OP 30.00 OP			12/20/0	4	(Date)
APPLICATION NO.	FILING DATE		FIRST NAME	D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/930,625	08/15/2001		H. Pete	r Anvin	in TRANS40 2203	
APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330		\$300	\$1630	12/20/2004
•	EXAMINER		IT	CLASS-SUBCLASS		
NAMAZI, MEHDI		2188		711-220000		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME ANI	O RESIDENCE DATA TO B	E PRINTED ON T	THE PATEN	T (print or type)		
PLEASE NOTE: Unles recordation as set forth i	s an assignee is identified be n 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will app T a substitute	pear on the patent. If an assi for filing an assignment.	gnee is identified below, the	document has been filed for
(A) NAME OF ASSIGN	IEE	(B) RESIDEN	CE: (CITY and STATE OR C	OUNTRY)	
Transme	ta Corporatio	on		Santa Cla	ra, CA	
Please check the appropriat	e assignee category or catego	ories (will not be pr	inted on the p	patent): 🗖 Individual 🔼	Corporation or other private g	roup entity Government
4a. The following fee(s) are	e enclosed:		. Payment of			
Issue Fee				in the amount of the fee(s) is		
	small entity discount permitt			t by credit card. Form PTO-20		P2
Advance Order - # o	of Copies10		The Dir Deposit Acc	ector is hereby authorized by count Number <u>23-00</u>	charge the required fee(s), o	copy of this form).
a. Applicant claims S	s (from status indicated above SMALL ENTITY status. See	37 CFR 1.27.			ALL ENTITY status. See 37	
The Director of the USPTC NOTE: The Issue Fee and I interest as shown by the rec	is requested to apply the Iss Publication Fee (if required) cords of the United States Pat	ne Fee and Pablica will not be accepte ent and Fradepark	tion Fee (if a d from anyon Office.	ny) or to re-apply any previous ne other than the applicant; a r	usly paid issue fee to the appli- egistered attorney or agent; or	cation identified above. the assignee or other party in
Authorized Signature	Mul				Dec 20, 2004	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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<u>Murabito</u>

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Typed or printed name Anthony C

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Docket No.: TRAN-P040
Whereby certify that this transmittal of the below described document is being deposited with the United States Postal Service in an envelope bearing First Class Postage and addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the

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12/20/04

Name of Person Making the Deposit:

Judy Davenport

Signature of the Person Making the Deposit:

Inventor(s):

H. Peter Anvin, Alex Klaiber, Guillermo J. Rozas, and Parag

Gupta

Serial No .:

09/930,625

Group Art Unit:

2188

Filed:

Deposit:

08/15/01

Examiner:

Namazi, Mehdi

Confirmation No:

2203

Title:

METHOD AND APPARATUS FOR IMPROVING SEGMENTED MEMORY ADDRESSING

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

ATTENTION: Mail Stop Issue Fee

Sir:

TRANSMITTAL OF PAYMENT OF ISSUE FEE (37 CFR 1.311)

Applicant hereby pays the issue fee for the attached Issue Fee Transmittal PTOL-85

X | Applicant is other than a small entity

Fee Calculation

(for other than a small entity)							
Application Status is:	<u>Regular</u>	<u>Design</u>	Total				
Fee (CFR 1.18(a) and (b)):	X \$1,400.00	\$800.00	1,400.00				
Additional Copies (10 @	30.00						
Publication Fee			300.00				
Total Fees			1,730.00				

PAYMENT OF FEES

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- The Commissioner is hereby authorized to charge any additional fees associated with this communication or credit any overpayment to Deposit Account No.: 23-0085. A <u>duplicate copy</u> of this authorization is enclosed.
- [X] A check in the amount of \$1,730.00
- Charge any fees required or credit any overpayments associated with this filing to Deposit Account No.: 23-0085.

Please direct all correspondence concerning the above-identified application to the following address:

WAGNER, MURABITO & HAO LLP Two North Market Street, Third Floor San Jose, California 95113 (408) 938-9060

Respectfully submitted,

Anthony C. Murabito Reg. No. 35,295